

## **NURSE TRAINING SCHOOLS OF NEW YORK STATE HOSPITALS**

BY MARY ELIZABETH MAY

Graduate of Rochester City Hospital; Teacher in the Willard State Hospital, N. Y.

THE first school was started at the Buffalo State Hospital in 1883 by Dr. Andrews. From 1883 to 1893, a school was started in each of a number of the New York State Hospitals. About 1896 a standard for the minimum training in all the State Hospitals was adopted by the superintendents and a training-school committee was appointed from their number. This committee prepares uniform written examinations for entrance to and graduation from the training schools of the New York State Hospitals. Each hospital decides which candidates pass the entrance examination, and the papers from the examinations held at the end of the junior and senior years are sent to the training-school committee for marking.

At first the teaching in these schools was most elementary, but as time has gone on the course has become broader and now, with the exception of the lack of experience in obstetrics and pediatrics, the course is a full one. The care of the insane is the special work, and the hospitals like best to keep in the service the nurses who graduate from these schools, promoting them to positions of responsibility as vacancies occur in the hospital. The greater usefulness of the graduate is recognized by the State in an increase of salary for each graduate. The following is an extract from the Willard State Hospital Training School Schedule:

“The Willard State Hospital Training School for Nurses was established in 1887. The pupils are selected from the attendants, by examination. The course covers a period of two years, during which practical training is given in the observation and care of all classes of patients under treatment in the wards of the hospital. The number of beds in the hospital is two thousand three hundred and twenty-two and there are opportunities for experience in the care and treatment of not only all forms of mental disease, but also of the acute and chronic illnesses and surgical conditions ordinarily met with in any community, some of which occur with relatively greater frequency among the insane.”

Class room work consists of lectures, demonstrations and recitations on:

- (1) The nursing of the insane,
- (2) Medical nursing (including *materia medica*),

(3) Surgical nursing, with operative technique, including gynaecological and genito-urinary branches,

(4) Theory of obstetrical nursing with experience whenever cases occur in the hospitals,

(5) Theory of nursing contagious diseases.

Practical training is given in the care of the insane and in the preparation and care of diet for the sick, bandaging, hydrotherapy, electrotherapy, gynaecology, genito-urinary diseases, isolation of patients with infectious diseases, thorough disinfection, operating room technique, preparation and after-care of surgical cases, urinalysis and in *materia medica*. The nurses are present and assist at autopsies. Massage is taught in some hospitals, though massage is not an obligatory part of the course. A special reference library for nurses is provided by the hospital and the members of the school may also have access to the medical library of the hospital. Lectures are given and quizzes are held by the medical staff, matron and pharmacist. At Willard, the chef instructs the members of the class in the preparation and care of the special diet for the sick; members of the senior class being detailed to the kitchen for practice during their senior year.

The nurses have services of definite periods in the wards for acute medical and surgical cases; for acute insanities (excitements); for acute insanities (depressions, confusions, delusional states); for infirm, chronic bed cases; for tuberculous cases; for convalescent cases, and for epileptics. The clinical instruction is given by the supervisors and charge nurses, principally, and in special conditions by the physicians and matron. All employees of the hospital are instructed in the hospital rules and regulations.

On the wards the pupil nurses are given systematic instruction in:

Deportment toward patients, medical and other officers, supervisors and fellow employees;

Ventilation, temperature and lighting of wards and sick rooms;

General and special cleaning of wards and rooms;

Care and cleaning of scrubbed and polished floors, tile, enamel, marble and metal work;

Making requisitions and receipting for ward supplies;

Use and care of disinfectants and other poisonous ward solutions;

Cleaning of windows, stairways, halls, clothes and dust chutes, toilet rooms, lavatories, baths and bedsteads;

Care, airing, cleaning and disinfecting of mattresses, pillows, bed linen, rubber sheets, other bed protectors, furniture, rugs and carpets;

Care of brooms, brushes, mops, pails and other ward utensils;

Care of wardrobes, bureaus and their contents ;  
Care of patients' clothing at night ;  
Care of clothes and linen rooms :  
(1) Marking hospital and private clothing,  
(2) Marking ward linen,  
(3) Arranging clothing and ward linen,  
(4) Mending clothing and ward linen,  
(5) Care of footwear,  
(6) Sending all wash articles to and receiving from laundry ;  
Care and use of syringes, atomizers, catheters, stomach tubes, ice and water bags, rubber rings, etc., basins, sputum cups, bedpans and urinals ;  
Care of bed patients ;  
Collection of excreta for examination ;  
Serving food to bed patients ;  
Taking pulse, temperature and respiration ;  
Making and sterilizing surgical dressings ;  
Preparation and administration of enemata and douches ;  
Preparation and application of poultices, stupes, mustard plasters, blisters ;  
Use of ointments, powders, liniments and other external applications ;  
Disinfection of excreta, clothing, bedding and person ;  
Catheterization and bladder irrigation ;  
Preparations for surgical operation :  
(1) Patient, bowels, bladder, skin—for anaesthesia, etc.,  
(2) Operating room,  
(3) Instruments and dressings,  
(4) Solutions,  
(5) Personal preparation—toilet, hands, costume, etc.,  
(6) Anaesthetist's articles,  
(7) The bed and clothing of the patient ;  
Assisting at surgical operations, and in the after-care of these cases ;  
Administration of medicines ;  
Observation of symptoms ;  
Keeping of bedside notes, charts, records and reports ;  
Care of patients convalescing from acute illnesses ;  
Dressing and undressing excited cases ;  
Getting patients ready for outdoor exercise, guarding and caring for patients during exercise ; precautions, attention to rest, toilet, exposure, emergencies ;

Attention to patients at table, persuasion of those who refuse to eat, training the disorderly, glutinous and filthy at table; spoon-feeding, tube-feeding, preparation of food, preparation and control of patient;

**Management of patients:**

(1) Tactful, gentle, patient, firm methods;

(2) Management of violence without physical restraint, destructiveness, mischievous tendencies, persistent restlessness, noisiness, agitation, emotional outbreaks, depressed conditions, delusions, suicidal tendencies;

(3) Nursing of epileptics, safe-guarding beds, radiators, etc., nursing during convulsions, after a convulsion, of status epilepticus; anticipation of convulsions; auræ, mental states, precautions against injuries and outbreaks. Management of the epileptic—mental condition; nursing of epileptic excitement, depression, automatic and impulsive states. Precautions in the occupations and diversion of epileptics. Dietary of epileptics. Rectal medication.

**Nursing of patients convalescing from the different psychoses:**

Special exercises, occupation,

Special training of apathetic, dull, reluctant patients,

Diversion of patients,

Attention to friends of patients and other visitors.

**Hydrotherapy:**

Care of hydrotherapy room,

Care and use of steam boxes, douche table, continuous bath, boiler, ice-box and allied appliances,

Preparation of patient for bath, effect on pulse, etc.,

Precautions to be observed during and following bath,

Technique of the various hydrotherapeutic measures.

Many of the State Hospitals have arranged for their pupil nurses to have experience in obstetrics as required by the Board of Regents.

Around three classes of patients, the more active and scientific work of the hospital centers. These classes are:

(1) The new cases,

(2) The acutely sick and surgical cases,

(3) The chronic, infirm and bedridden patients.

The new cases are admitted on the reception service. Patients with acute illnesses in all parts of the institution other than the wards for chronic infirm and bedridden patients, and all cases needing surgical operation, are transferred to the sick wards if they are confined to bed, ill for more than twenty-four hours. The sick wards are arranged and equipped for general hospital work and the service for chronic infirm and bedridden cases is managed to some extent on general hospital methods.

Several of the hospitals have pavilions for tuberculous patients, and hospitals that have not separate buildings have these patients segregated in wards in the winter and during the summer in tents. Plans have been made for a pavilion for tuberculous patients for the Willard State Hospital and work will probably be started on this building in the near future.

Records of the work done by the pupil nurses on the wards are kept under the following headings:

Practical work,	Neatness,
General efficiency,	Deportment,
Punctuality,	Special cases.
Industry,	

At the end of each month these are signed by the supervisor and physician in charge and are filed, so that the average standing may be made up at the end of the year. These records are sent with the examination papers of each pupil, to the training-school committee of superintendents.

Great progress has been made during the last twenty-five years and there still remains much to accomplish. Teachers who could give their whole time to teaching would be a great help, provided the right kind of people could be found to take up the work.

Dr. Cowles, superintendent of McLean Hospital, in a paper read before the Psychological Section of the International Congress, Washington, D. C., in 1887, on "Nursing Reform for the Insane," says:

"The practical questions resolved themselves, therefore, into one of getting proper instructors and laying a foundation for thorough work in the training. \* \* \* At first a number of trained nurses from the general hospitals were invited into the service. Indeed, one employed as early as 1877, in a common ward for men, remained there five years, but with limited duty. \* \* \* From 1880 to 1885, nine other such hospital nurses were employed in female wards, with a view to gaining their aid in the establishment of our school. With one exception the terms of service of these were only between one and six months; they would stay no longer. One other was appointed superintendent of nurses in 1882, but withdrew after two years; and another, promoted to be supervisor, still remains after three years' service, doing good work also as a teacher. From experience with these twelve nurses, there is ample warrant for saying that their general hospital training had, in some respects, actually unfitted them for 'mental' nursing. \* \* \* The outcome of it was, that our female supervisor, who had been nearly twenty years in the asylum, was allowed by the authorities of the Boston

City Hospital to receive there a six months special and comprehensive course of training. She was instructed not only in the points upon which her experience was lacking, but she *learned the technique of school methods.* \* \* \* Do not try to begin with a simply hospital trained woman in charge, if better can be done, but regard it as imperative that, whoever it is, she shall have some general hospital training. \* \* \* As a head for the school takes some suitable woman already in the service, used to the ways of that particular asylum and its superintendent and send her to some general hospital to be fitted for the new work; a year's training might be enough. The hospitals are likely to be willing to help in this way; such things were done for some of them in the beginning."

A similar experience to this of Dr. Cowles has been meet with by the superintendents of some of the New York State Hospitals who have attempted unsuccessfully to make nurses trained in general hospitals fit into the plan of State Hospital work, and each failure has led to discouragement on the part of the superintendent and his staff and also on the part of general hospital nurses in trying these positions.

On first taking up work among the insane, in 1890, it seemed to the writer of this paper most desirable for nurses graduated from general hospitals to take positions in hospitals for the insane as teachers; this meant, at that time, that a vacancy in the position of matron might be filled by a nurse from a general hospital. When a general hospital graduate has not succeeded as matron of a New York State Hospital, it has seemed to be due to her idea that only general hospital methods were worth while and she has thus antagonized those who have been giving their best efforts for years to improving the standard of care for the insane and who resented interference on the part of anyone so inexperienced in this special work.

The beginning of her work among the insane was under especially favorable conditions for the writer; the hospital was a small one, there being only two physicians on the staff and both of these physicians wanted a graduate nurse as matron; they were most patient with her mistakes and encouraged her in her methods of teaching the attendants. At that time she gave all of the clinical instruction in general nursing. The hospital being small she could come into close contact with the attendants and could especially supervise all the general nursing. She also had time to study the methods of caring for the different conditions of the insane; and she never went on the wards, for years, without learning from the nurses important lessons in tact, patience and skill in caring for the insane. She feels convinced that had she gone into a large hospital, at

first, her time would have been short in this work, because it was three years before she could honestly say, she liked the work as well as general hospital work.

In addition to the plan offered by Dr. Cowles, another suggests itself. Newly graduated physicians come to State Hospitals as clinical assistants in order to get experience in this work; if a similar arrangement could be made for nurses, so that those graduating from a general hospital could come to a State Hospital as clinical and class room assistants and for the study of State Hospital methods, it would constantly bring in the latest methods in general hospital work and would also benefit the nurses who would thus be better prepared for any work institutional or private. Appointment to the position of matron in a New York State Hospital is made from a civil service list of names of those who have taken the written examination for this position. There is plenty of work to be done, and the work is just as important and calls for as high qualities on the part of the pupil nurses and instructors as any other form of nursing service. The realization of the importance of these high demands has given the chief impetus toward development and improvement of the nursing service among the insane.

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### THE EARLY TEACHING OF NURSES AT THE SALPÉTRIÈRE HOSPITAL, PARIS \*

BY MADAME P. GILLOT

Ancienne Directrice des Ecoles de la Salpêtrière.

FIFTEEN years ago, the Salpêtrière Hospital was entirely unlike any other of the hospitals in Paris. Its distance from the centre of the town, its important buildings, its immense gardens and its beautiful avenues of old trees, gave one, on entering, the impression of a pretty little provincial town, where the mind could repose in perfect calm. The population, too, was far from being a noisy one. It was, and is still, composed of old and infirm women, lunatics, and those suffering from nervous complaints. Poor creatures, all of them, to whom perfect rest and quiet is a necessity.

As to the staff of the hospital, it was composed of two distinct elements. The first consisted of young girls from the provinces, Bretons for the most part, called to Salpêtrière by their friends or relations, who were already employed there. The second element

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\* Read at the International Conference on Nursing at Paris, June, 1907.